



**EXPRESSION OF INTEREST APPLICATION FORM**

**BASIC INFORMATION**

Name of Center: \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Contact Telephone and Fax: (T) 867-\_\_\_\_\_ (F) 867-\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**COLLECTIONS INFORMATION**

Number of objects in collection (a reasonable estimate is ok): \_\_\_\_\_

Type of objects in collection (e.g. clothing, sculptures, archives, photographs, movies, etc...): \_\_\_\_\_  
\_\_\_\_\_

Type of material in collection (e.g. paper, animal skins, stone, taxidermy, acetate film, wood, etc...):  
\_\_\_\_\_  
\_\_\_\_\_

Please describe why you would like a Conservator to visit your center and conduct a risk assessment:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe how this visit ties into your organizations mandate and future plans:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please outline in a statement how your board of directors has supported your application to this program.  
Please provide documentation to support this:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My organization prefers to have the Conservator visit during the following dates (October and November):  
\_\_\_\_\_

**CRITERIA**

- 1) My center is not-for-profit and open to the public year-round/seasonally: YES / NO
- 2) I will be able to provide the Conservator with the documentation requested (if it exists) in a timely fashion so they can prepare prior to their visit: YES / NO
- 3) I have the ability to share a summary of the findings with 2-3 other heritage organizations in my region: YES / NO
- 4) I have had an assessment or conservation work done on my collection within the past 3 years: YES / NO
- 5) My center is able to pay up to \$500.00 fee for this service: YES / NO

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_